2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2008
Secretary of State

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Entity Name: J&H RESTAURANT MAINTENANCE AND REPAIR LLC

Current Principal Place of Business:

406 WEST CHASE STREET
PENSACOLA, FL 32501 US

New Principal Place of Business:

406 WEST CHASE STREET
PENSACOLA, FL 32502 US

Current Mailing Address:

406 WEST CHASE STREET
PENSACOLA, FL 32501 US

New Mailing Address:

406 WEST CHASE STREET
PENSACOLA, FL 32502 US

FEI Number: 26-1283410 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JONES, DANIEL A
406 WEST CHASE STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

JONES, DANIEL A
406 WEST CHASE STREET
PENSACOLA, FL 32502 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/12/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: JONES, DANIEL A
Address: 406 WEST CHASE STREET
City-St-Zip: PENSACOLA, FL 32501 US

Title: MGR ( ) Delete
Name: HILL, JASON S
Address: 16000D BISHOP TRACE
City-St-Zip: LILLIAN, AL 36549 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: JONES, DANIEL A
Address: 406 WEST CHASE STREET
City-St-Zip: PENSACOLA, FL 32502 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIEL ADAM JONES MGR 04/12/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date